

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

BLACK REPUBLICAN PAC

ADDRESS (number and street)

PO BOX 96613

☐Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20090

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00437053

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☒July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2011

through

06

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

SCOTT B MACKENZIE

Signature of Treasurer

Electronically Filed by SCOTT B MACKENZIE

Date

07

27

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
BLACK REPUBLICAN PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		5437.34
(b) Cash on Hand at Beginning of Reporting Period .....	5437.34	
(c) Total Receipts (from Line 19) .....	243338.81	243338.81
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	248776.15	248776.15
7. Total Disbursements (from Line 31) .....	230308.52	230308.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	18467.63	18467.63
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	48297.60	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

BLACK REPUBLICAN PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	35733.66	35733.66
(ii) Unitemized .....	207605.15	207605.15
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	243338.81	243338.81
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	243338.81	243338.81
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	243338.81	243338.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	243338.81	243338.81

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	225308.52	225308.52	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	225308.52	225308.52	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ..... ➤	0.00	0.00	
29. Other Disbursements.....	5000.00	5000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	230308.52	230308.52	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	230308.52	230308.52	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	243338.81	243338.81
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	243338.81	243338.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	225308.52	225308.52
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	225308.52	225308.52

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS RICHARD ABSHIRE 770**

Mailing Address **11930 S DURRETTE DR**

City State Zip Code  
**HOUSTON TX 77024**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ADAMS RESOURCES & ENERGY  
 INC**

Occupation  
**ACCOUNTANT**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt

**05 / 19 / 2011**

Transaction ID: SA11AI.4245

Amount of Each Receipt this Period

**225.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR TED AMSBAUGH 591**

Mailing Address **1302 24TH ST W # 329**

City State Zip Code  
**BILLINGS MT 59102**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**04 / 14 / 2011**

Transaction ID: SA11AI.4407

Amount of Each Receipt this Period

**150.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR BILLY J ANDERSON 212**

Mailing Address **414 WATER ST APT 2204**

City State Zip Code  
**BALTIMORE MD 21202**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**FEDERAL DEPOSIT INSURANCE  
 CORP**

Occupation  
**FINANCE**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**05 / 17 / 2011**

Transaction ID: SA11AI.4430

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**475.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MR PORTER BALDRIDGE 984**

Mailing Address **3702 S FIFE ST**

City State Zip Code  
**TACOMA WA 98409**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**FINANCIAL SERVICES**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt

**01 / 27 / 2011**

**Transaction ID: SA11AI.4701**

Amount of Each Receipt this Period

**125.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR CECIL BARNETT 402**

Mailing Address **126 INDIAN HILLS TRL**

City State Zip Code  
**LOUISVILLE KY 40207**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALGOOD FOOD CO**

Occupation  
**PRESIDENT**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**01 / 10 / 2011**

**Transaction ID: SA11AI.4778**

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR CECIL BARNETT 402**

Mailing Address **126 INDIAN HILLS TRL**

City State Zip Code  
**LOUISVILLE KY 40207**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ALGOOD FOOD CO**

Occupation  
**PRESIDENT**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt

**06 / 27 / 2011**

**Transaction ID: SA11AI.4777**

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**475.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 8 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MR HANS BERGSTROM 334**

Mailing Address **2612 SW 15TH ST**

City State Zip Code  
**DEERFIELD BCH FL 33442**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**PROFESSOR**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**04 / 05 / 2011**

**Transaction ID: SA11AI.5060**

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR MARTIN J BIENENSTOCK 105**

Mailing Address **514 MT HOLLY RD**

City State Zip Code  
**KATONAH NY 10536**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**ATTORNEY**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**05 / 25 / 2011**

**Transaction ID: SA11AI.5150**

Amount of Each Receipt this Period

**1000.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR KENNETH B BLAIR 160**

Mailing Address **113 IRON BRIDGE RD**

City State Zip Code  
**SARVER PA 16055**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**225.00**

Date of Receipt

**06 / 13 / 2011**

**Transaction ID: SA11AI.5237**

Amount of Each Receipt this Period

**75.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1325.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 92

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MR KENNETH B BLAIR 160**

Mailing Address **113 IRON BRIDGE RD**

City State Zip Code  
**SARVER PA 16055**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 6 / 2 3 / 2 0 1 1**

**Transaction ID: SA11AI.5239**

Amount of Each Receipt this Period

**75.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR THOMAS BROWN 073**

Mailing Address **221 LIBERTY AVE**

City State Zip Code  
**JERSEY CITY NJ 07306**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**ERNST & YOUNG**

Occupation  
**PARTNER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 3 / 2 8 / 2 0 1 1**

**Transaction ID: SA11AI.5620**

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**GUS A BUDER 877, 3D**

Mailing Address **560 RAYADO CREEK RD**

City State Zip Code  
**CIMARRON NM 87714**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**350.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 4 / 1 4 / 2 0 1 1**

**Transaction ID: SA11AI.5783**

Amount of Each Receipt this Period

**250.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**575.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 10 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**GUS A BUDER 877, 3D**

Mailing Address **560 RAYADO CREEK RD**

City State Zip Code  
**CIMARRON NM 87714**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**600.00**

Date of Receipt

**05 / 09 / 2011**

**Transaction ID: SA11AI.5784**

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**GUS A BUDER 877, 3D**

Mailing Address **560 RAYADO CREEK RD**

City State Zip Code  
**CIMARRON NM 87714**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**850.00**

Date of Receipt

**06 / 01 / 2011**

**Transaction ID: SA11AI.5785**

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS JEAN W BURRAGE 045**

Mailing Address **353 BRISTOL RD**

City State Zip Code  
**DAMARISCOTTA ME 04543**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**04 / 13 / 2011**

**Transaction ID: SA11AI.5854**

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**600.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MR DOMINICK S BUTCH 285

Mailing Address 105 WHITE SWAN WAY

City State Zip Code  
**SWANSBORO NC 28584**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 4 / 1 4 / 2 0 1 1**

Transaction ID: SA11AI.5891

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
 MR DOMINICK S BUTCH 285

Mailing Address 105 WHITE SWAN WAY

City State Zip Code  
**SWANSBORO NC 28584**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 5 / 1 0 / 2 0 1 1**

Transaction ID: SA11AI.5890

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR R M CARPENTER 197, III

Mailing Address PO BOX 732

City State Zip Code  
**MONTCHANIN DE 19710**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 SELF EMPLOYED

Occupation  
 INVESTOR

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 1 / 2 7 / 2 0 1 1**

Transaction ID: SA11AI.6056

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

775.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 12 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS JOANNA CHAMPLIN 731**

Mailing Address **6325 HARDEN DR**

City State Zip Code  
**OKLAHOMA CITY OK 73118**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**01 / 27 / 2011**

Transaction ID: SA11AI.6192

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**WILLIAM CLEARY 190**

Mailing Address **800 E LANCASTER AVE**

City State Zip Code  
**VILLANOVA PA 19085**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**255.00**

Date of Receipt

**06 / 23 / 2011**

Transaction ID: SA11AI.6350

Amount of Each Receipt this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS ELEANOR COBB 900**

Mailing Address **131 S VISTA ST**

City State Zip Code  
**LOS ANGELES CA 90036**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**03 / 16 / 2011**

Transaction ID: SA11AI.6386

Amount of Each Receipt this Period

**300.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**650.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS BETTY R CRAWFORD 527**

Mailing Address **601 ASPEN TRL**

City State Zip Code  
**MUSCATINE IA 52761**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**PLU MOR LANES**

Occupation  
**BOWLING**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**02 / 28 / 2011**

Transaction ID: SA11AI.6640

Amount of Each Receipt this Period

**300.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR JOHN CRAWFORD 950**

Mailing Address **20128 CHATEAU DR**

City State Zip Code  
**SARATOGA CA 95070**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INTEL**

Occupation  
**COMPUTER ARCHITECT**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**06 / 28 / 2011**

Transaction ID: SA11AI.6644

Amount of Each Receipt this Period

**300.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR KENT R DAVIS 370**

Mailing Address **505 SKYHAWK PL**

City State Zip Code  
**FRANKLIN TN 37064**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**01 / 18 / 2011**

Transaction ID: SA11AI.6855

Amount of Each Receipt this Period

**500.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1100.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MR KENT R DAVIS 370

Mailing Address 505 SKYHAWK PL

City State Zip Code  
**FRANKLIN TN 37064**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.6856

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
 MATTHEW S DESALVO 068

Mailing Address 52 DAWN HARBOR LN

City State Zip Code  
**RIVERSIDE CT 06878**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 CREDIT SUISSE

Occupation  
 EXECUTIVE

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 2 / 2 0 1 1

Transaction ID: SA11AI.6993

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR RUSSELL G DOUGLAS 334

Mailing Address 400 NE 47TH ST

City State Zip Code  
**BOCA RATON FL 33431**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 235.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.7191

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

785.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**JANE P DOYLE 301**

Mailing Address **3172 HORSLEY MILL RD**

City State Zip Code  
**CARROLLTON GA 30116**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**205.00**

Date of Receipt

**06 / 17 / 2011**

Transaction ID: SA11AI.7220

Amount of Each Receipt this Period

**35.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR WESLEY H EATON 019**

Mailing Address **304 BROOKSBY VILLAGE DR UNIT 308**

City State Zip Code  
**PEABODY MA 01960**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**06 / 06 / 2011**

Transaction ID: SA11AI.7369

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR RONALD ELLIS 112**

Mailing Address **2340 E 17TH ST**

City State Zip Code  
**BROOKLYN NY 11229**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**06 / 23 / 2011**

Transaction ID: SA11AI.7490

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**385.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS MARJORIE ERSLAND 730**

Mailing Address **2100 NE 140TH ST APT 203D**

City State Zip Code  
**EDMOND OK 73013**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt

**03 / 14 / 2011**

Transaction ID: SA11AI.7575

Amount of Each Receipt this Period

**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MS MARY J Y GULINO 220**

Mailing Address **4200 OLD COLUMBIA PIKE**

City State Zip Code  
**ANNANDALE VA 22003**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**210.00**

Date of Receipt

**06 / 21 / 2011**

Transaction ID: SA11AI.8649

Amount of Each Receipt this Period

**105.00**

**C.**

Full Name (Last, First, Middle Initial)  
**DONALD GUMPERTS 916**

Mailing Address **4217 NAVAJO AVE**

City State Zip Code  
**TOLUCA LAKE CA 91602**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt

**03 / 22 / 2011**

Transaction ID: SA11AI.8654

Amount of Each Receipt this Period

**1000.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1205.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 92

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.**Full Name (Last, First, Middle Initial)  
MR JAMES E HALL 797

Mailing Address PO BOX 10666

City	State	Zip Code
MIDLAND	TX	79702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
ENGINEER
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	1	1

Transaction ID: SA11AI.8770

Amount of Each Receipt this Period

500.00

**B.**Full Name (Last, First, Middle Initial)  
J KERN HAMILTON 950

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City	State	Zip Code
LOS GATOS	CA	95032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	1	1

Transaction ID: SA11AI.8802

Amount of Each Receipt this Period

151.00

**C.**Full Name (Last, First, Middle Initial)  
DR JOHN P HANDAGO 109

Mailing Address 186 PURGATORY RD

City	State	Zip Code
CAMPBELL HALL	NY	10916

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
DOCTOR
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Transaction ID: SA11AI.8828

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

751.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 92

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.**Full Name (Last, First, Middle Initial)  
RANDI J HELGESON 553

Mailing Address 16485 ELLERDALE LN

City	State	Zip Code
EDEN PRAIRIE	MN	55346

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	1

Transaction ID: SA11AI.9100

Amount of Each Receipt this Period

250.00

**B.**Full Name (Last, First, Middle Initial)  
RANDI J HELGESON 553

Mailing Address 16485 ELLERDALE LN

City	State	Zip Code
EDEN PRAIRIE	MN	55346

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	0	/	2	0	1	1

Transaction ID: SA11AI.9101

Amount of Each Receipt this Period

500.00

**C.**Full Name (Last, First, Middle Initial)  
MR ROBERT HICKEY 764

Mailing Address 7800 COUNTY ROAD 327

City	State	Zip Code
BLANKET	TX	76432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	0	/	2	0	1	1

Transaction ID: SA11AI.9234

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

850.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MR ALBERT HLAVATY 774**

Mailing Address **3515 WEST LOOP APT 202**

City State Zip Code  
**EL CAMPO TX 77437**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**235.00**

Date of Receipt

**06 / 02 / 2011**

Transaction ID: SA11AI.9290

Amount of Each Receipt this Period

**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**JOHN A HOLLINSHEAD 780**

Mailing Address **396 ESTANCIA LN**

City State Zip Code  
**BOERNE TX 78006**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**04 / 20 / 2011**

Transaction ID: SA11AI.9363

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR FRED HOLTON 982**

Mailing Address **PO BOX 2544**

City State Zip Code  
**BLAINE WA 98231**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**543.21**

Date of Receipt

**06 / 07 / 2011**

Transaction ID: SA11AI.9400

Amount of Each Receipt this Period

**543.21**

**SUBTOTAL** of Receipts This Page (optional) .....

**893.21**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 92

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.**Full Name (Last, First, Middle Initial)  
MR PETER HUMPHRIS 087

Mailing Address 14 MANASSAS DR

City	State	Zip Code
TOMS RIVER	NJ	08757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	1

Transaction ID: SA11AI.9552

Amount of Each Receipt this Period

250.00

**B.**Full Name (Last, First, Middle Initial)  
MR PETER HUMPHRIS 087

Mailing Address 14 MANASSAS DR

City	State	Zip Code
TOMS RIVER	NJ	08757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	0	/	2	0	1	1

Transaction ID: SA11AI.9553

Amount of Each Receipt this Period

175.00

**C.**Full Name (Last, First, Middle Initial)  
MR ROLAND R ILSSEN 902

Mailing Address 6847 ABBOTTSWOOD DR

City	State	Zip Code
RANCHO PALOS VERDE	CA	90275

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	1	1

Transaction ID: SA11AI.9627

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

525.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MISS ELIZABETH JACKSON 630

Mailing Address 724 CLAYTON CORNERS DR

City State Zip Code  
**BALLWIN MO 63011**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.9685

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
 MR JERRY HOLTON JONES 223

Mailing Address 821 EDEN CT

City State Zip Code  
**ALEXANDRIA VA 22308**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 SELF EMPLOYED

Occupation  
 CONSULTANT

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.9905

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
 LT COL ROBERT KALINA 760

Mailing Address 2704 PARKVIEW DR #2304

City State Zip Code  
**BEDFORD TX 76022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.9999

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

**400.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 LT COL ROBERT KALINA 760

Mailing Address 2704 PARKVIEW DR #2304

City State Zip Code  
**BEDFORD TX 76022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.10000

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
 ERHARD KARL 365

Mailing Address 117 DURBY LN

City State Zip Code  
**FOLEY AL 36535**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NEXTSOURCE

Occupation  
 PART TIME SALES

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.10026

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)  
 MRS MARIAN KELLER 070

Mailing Address 1411 CHAPEL HILL RD

City State Zip Code  
**MOUNTAINSIDE NJ 07092**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 238.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 1 1

Transaction ID: SA11AI.10075

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional) .....

**325.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MISS LINDA KENDALL 330

Mailing Address 50 CLUB HOUSE RD

City State Zip Code  
**KEY LARGO FL 33037**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.10116

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
 DR JOHN G KIDD 019

Mailing Address 118 MAIN ST

City State Zip Code  
**TOPSFIELD MA 01983**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 DUTTON FAMILY CARE

Occupation  
 PHYSICIAN

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.10159

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
 STANLEY K KINDER 895

Mailing Address 3565 LONE TREE LN

City State Zip Code  
**RENO NV 89511**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 SIERRA CHEMICAL CO

Occupation  
 ENGINEER

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 1 1

Transaction ID: SA11AI.10194

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MR CHARLES A KLEIN 088, III**

Mailing Address **2 IVY WAY**

City State Zip Code  
**DAYTON NJ 08810**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**203.00**

Date of Receipt

**06 / 01 / 2011**

**Transaction ID: SA11AI.10286**

Amount of Each Receipt this Period

**51.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR WALTER H KLEINER 980**

Mailing Address **1725 89TH PL NE**

City State Zip Code  
**CLYDE HILL WA 98004**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**375.00**

Date of Receipt

**04 / 14 / 2011**

**Transaction ID: SA11AI.10292**

Amount of Each Receipt this Period

**375.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR WALTER H KLEINER 980**

Mailing Address **1725 89TH PL NE**

City State Zip Code  
**CLYDE HILL WA 98004**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**750.00**

Date of Receipt

**06 / 21 / 2011**

**Transaction ID: SA11AI.10293**

Amount of Each Receipt this Period

**375.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**801.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MISS ANN KREBES 551**

Mailing Address **1921 JAMES AVE**

City State Zip Code  
**SAINT PAUL MN 55105**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**04 / 04 / 2011**

Transaction ID: SA11AI.10451

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS THOMAS F KYLE 130, III**

Mailing Address **215 SUMMERHAVEN DR S**

City State Zip Code  
**EAST SYRACUSE NY 13057**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**525.00**

Date of Receipt

**04 / 15 / 2011**

Transaction ID: SA11AI.10519

Amount of Each Receipt this Period

**350.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS THOMAS F KYLE 130, III**

Mailing Address **215 SUMMERHAVEN DR S**

City State Zip Code  
**EAST SYRACUSE NY 13057**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**825.00**

Date of Receipt

**06 / 27 / 2011**

Transaction ID: SA11AI.10520

Amount of Each Receipt this Period

**300.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**900.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MR PETER LAWSON-JOHNSTON 334**

Mailing Address **134 S BEACH RD**

City State Zip Code  
**HOBE SOUND FL 33455**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**03 / 17 / 2011**

Transaction ID: SA11AI.10681

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR ROBERT E MALONE 852**

Mailing Address **18721 E BUCKSKIN DR  
P O BOX 32063**

City State Zip Code  
**RIO VERDE AZ 85263**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**03 / 14 / 2011**

Transaction ID: SA11AI.11165

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MS LORNA MANSFIELD 945**

Mailing Address **1954 MAGNOLIA WAY**

City State Zip Code  
**WALNUT CREEK CA 94595**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt

**02 / 22 / 2011**

Transaction ID: SA11AI.11187

Amount of Each Receipt this Period

**125.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**625.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MS LORNA MANSFIELD 945

Mailing Address 1954 MAGNOLIA WAY

City State Zip Code  
**WALNUT CREEK CA 94595**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.11188

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)  
 MS LORNA MANSFIELD 945

Mailing Address 1954 MAGNOLIA WAY

City State Zip Code  
**WALNUT CREEK CA 94595**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.11189

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)  
 MS LORNA MANSFIELD 945

Mailing Address 1954 MAGNOLIA WAY

City State Zip Code  
**WALNUT CREEK CA 94595**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.11190

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MS LORNA MANSFIELD 945**

Mailing Address **1954 MAGNOLIA WAY**

City State Zip Code  
**WALNUT CREEK CA 94595**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**710.00**

Date of Receipt

**06 / 01 / 2011**

Transaction ID: SA11AI.11191

Amount of Each Receipt this Period

**110.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MS LORNA MANSFIELD 945**

Mailing Address **1954 MAGNOLIA WAY**

City State Zip Code  
**WALNUT CREEK CA 94595**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**785.00**

Date of Receipt

**06 / 21 / 2011**

Transaction ID: SA11AI.11192

Amount of Each Receipt this Period

**75.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR ALVIN MCQUINN 341**

Mailing Address **1551 GULF SHORE BLVD S**

City State Zip Code  
**NAPLES FL 34102**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**QUINN STAR INVESTMENTS**

Occupation  
**MANAGING PARTNER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**04 / 08 / 2011**

Transaction ID: SA11AI.11612

Amount of Each Receipt this Period

**250.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**435.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)

MRS MARY M MCVAY 553

Mailing Address 2201 ISENGARD ST

City

MINNETONKA

State

MN

Zip Code

55305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.11621

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

LAWRENCE MEEKER 761

Mailing Address 4900 WESTRIDGE AVE

City

FORT WORTH

State

TX

Zip Code

76116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MEEKER & CO INC

Occupation  
PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 5 / 2 0 1 1

Transaction ID: SA11AI.11633

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

KENNETH MERRILL 306

Mailing Address 150 SWEETBRIAR CT

City

WINTERVILLE

State

GA

Zip Code

30683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.11671

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

950.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS SHARON K MIDDLETON 201**

Mailing Address **15062 BROWN POST LN**

City State Zip Code  
**CENTREVILLE VA 20121**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MANASSAS PEDIATRICS**

Occupation  
**REGISTERED NURSE**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**04 / 05 / 2011**

**Transaction ID: SA11AI.11725**

Amount of Each Receipt this Period

**500.00**

**B.**

Full Name (Last, First, Middle Initial)  
**CAPT & MRS RICHARDS T MILLER 214**

Mailing Address **7101 BAY FRONT DR APT 316**

City State Zip Code  
**ANNAPOLIS MD 21403**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**US NAVY**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**03 / 30 / 2011**

**Transaction ID: SA11AI.11764**

Amount of Each Receipt this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
**DR THOMAS MIMS 770, MD**

Mailing Address **1655 BANKS ST**

City State Zip Code  
**HOUSTON TX 77006**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**04 / 12 / 2011**

**Transaction ID: SA11AI.11826**

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**700.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**DR THOMAS MIMS 770, MD**

Mailing Address **1655 BANKS ST**

City State Zip Code  
**HOUSTON TX 77006**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**05 / 17 / 2011**

Transaction ID: SA11AI.11827

Amount of Each Receipt this Period

**200.00**

**B.**

Full Name (Last, First, Middle Initial)  
**DR THOMAS MIMS 770, MD**

Mailing Address **1655 BANKS ST**

City State Zip Code  
**HOUSTON TX 77006**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**700.00**

Date of Receipt

**06 / 10 / 2011**

Transaction ID: SA11AI.11828

Amount of Each Receipt this Period

**200.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS MARY K MONTGOMERY 379**

Mailing Address **7433 SOMERSET RD**

City State Zip Code  
**KNOXVILLE TN 37909**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**06 / 08 / 2011**

Transaction ID: SA11AI.11925

Amount of Each Receipt this Period

**300.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**700.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MR JOSEPH MOORE 853**

Mailing Address **PO BOX 5132**

City State Zip Code  
**SUN CITY WEST AZ 85376**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**02 / 25 / 2011**

**Transaction ID: SA11AI.11979**

Amount of Each Receipt this Period

**300.00**

**B.**

Full Name (Last, First, Middle Initial)  
**IA MORRIS 144**

Mailing Address **2867 OUTLET RD**

City State Zip Code  
**CLIFTON SPRINGS NY 14432**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GW LISK CO INC**

Occupation  
**ENGINEER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt

**03 / 14 / 2011**

**Transaction ID: SA11AI.12043**

Amount of Each Receipt this Period

**1000.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MARK A MOTTILLO 163**

Mailing Address **228 E CENTRAL AVE**

City State Zip Code  
**TITUSVILLE PA 16354**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**OIL VALLEY PHY THERAPY IN**

Occupation  
**OWNER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**06 / 10 / 2011**

**Transaction ID: SA11AI.12086**

Amount of Each Receipt this Period

**250.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1550.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN H MULLER 068

Mailing Address 67 BANK ST

City

NEW CANAAN

State

CT

Zip Code

06840

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 1 1

Transaction ID: SA11AI.12114

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City

SAINT PAUL

State

MN

Zip Code

55119

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11AI.12155

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City

SAINT PAUL

State

MN

Zip Code

55119

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.12157

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)

MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City

SAINT PAUL

State

MN

Zip Code

55119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.12158

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City

SAINT PAUL

State

MN

Zip Code

55119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.12159

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City

SAINT PAUL

State

MN

Zip Code

55119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.12160

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

135.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)

MR DONALD J NESETH 600

Mailing Address 1148 ARBOR CIR

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.12302

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MRS EMMA JANE NORTH 750

Mailing Address 366 PINE VALLEY DR

City

FAIRVIEW

State

TX

Zip Code

75069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
HOUSEWIFE

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.12414

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR RAY P ODEN 711, JR

Mailing Address 702 THORA BLVD

City

SHREVEPORT

State

LA

Zip Code

71106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.12481

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 REV EDMUND W OLIFIERS 209, JR

Mailing Address 2129 BUCKNELL TER

City State Zip Code  
**SILVER SPRING MD 20902**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**CLERGY**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
**03 09 2011**

**Transaction ID: SA11AI.12516**

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
 MISS EDITH P PALMER 109

Mailing Address 282 LAROE RD

City State Zip Code  
**CHESTER NY 10918**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
**HOMEMAKER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
**02 22 2011**

**Transaction ID: SA11AI.12651**

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
 MISS EDITH P PALMER 109

Mailing Address 282 LAROE RD

City State Zip Code  
**CHESTER NY 10918**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
**HOMEMAKER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
**05 09 2011**

**Transaction ID: SA11AI.12652**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

**1300.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**PETERSON PETERSON 331**

Mailing Address **11193 NE 8TH CT**

City State Zip Code  
**BISCAYNE PARK FL 33161**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**04 / 01 / 2011**

**Transaction ID: SA11AI.12874**

Amount of Each Receipt this Period

**300.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MS ELAINE K PORTIER 970**

Mailing Address **15770 SW TOWHEE LN**

City State Zip Code  
**BEAVERTON OR 97007**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**450.00**

Date of Receipt

**02 / 25 / 2011**

**Transaction ID: SA11AI.13038**

Amount of Each Receipt this Period

**300.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MS ELAINE K PORTIER 970**

Mailing Address **15770 SW TOWHEE LN**

City State Zip Code  
**BEAVERTON OR 97007**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**03 / 18 / 2011**

**Transaction ID: SA11AI.13043**

Amount of Each Receipt this Period

**150.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**750.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MS ELAINE K PORTIER 970

Mailing Address 15770 SW TOWHEE LN

City State Zip Code  
**BEAVERTON OR 97007**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 HOMEMAKER

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.13041

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
 MS ELAINE K PORTIER 970

Mailing Address 15770 SW TOWHEE LN

City State Zip Code  
**BEAVERTON OR 97007**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 HOMEMAKER

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.13040

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
 MS ELAINE K PORTIER 970

Mailing Address 15770 SW TOWHEE LN

City State Zip Code  
**BEAVERTON OR 97007**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 HOMEMAKER

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 1100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.13042

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MR JAMES L PREVITI 917

Mailing Address 12770 AMBER LN

City State Zip Code  
**RANCHO CUCAMONGA CA 91739**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 SELF EMPLOYED

Occupation  
 BUILDER

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 0 4 / 2 0 1 1

Transaction ID: SA11AI.13094

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
 MS KAREN PRITCHARD -35

Mailing Address 110 D ST SE

City State Zip Code  
**WASHINGTON DC 20003**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 -35.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 1 / 2 0 1 1

Transaction ID: SA11AI.13109

Amount of Each Receipt this Period

-35.00

NSF CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
 LENORA PUSTA 855

Mailing Address 138 W SUNFLOWER DR

City State Zip Code  
**PAYSON AZ 85541**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.13160

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

665.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MR CALVIN QUAMEN 574**

Mailing Address **10428 428TH AVE**

City State Zip Code  
**BRITTON SD 57430**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**FARMER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**235.00**

Date of Receipt

**06 / 28 / 2011**

**Transaction ID: SA11AI.13179**

Amount of Each Receipt this Period

**50.00**

**B.**

Full Name (Last, First, Middle Initial)  
**DR V BIRCH RAMBO 294, MD**

Mailing Address **201 W 9TH NORTH ST UNIT 157**

City State Zip Code  
**SUMMERVILLE SC 29483**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**PHYSICIAN**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**275.00**

Date of Receipt

**04 / 12 / 2011**

**Transaction ID: SA11AI.13225**

Amount of Each Receipt this Period

**75.00**

**C.**

Full Name (Last, First, Middle Initial)  
**ROSAL RAWLINSON 940**

Mailing Address **1479 FALLEN LEAF LN**

City State Zip Code  
**LOS ALTOS CA 94024**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**205.00**

Date of Receipt

**06 / 30 / 2011**

**Transaction ID: SA11AI.13289**

Amount of Each Receipt this Period

**75.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**200.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MR MICHAEL S REAVEY 761

Mailing Address 2421 RYAN AVE

City State Zip Code  
**FORT WORTH TX 76110**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.13311

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
 MR EDWARD S REISMAN 904

Mailing Address 501 SANTA MONICA BLVD STE 610

City State Zip Code  
**SANTA MONICA CA 90401**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 SELF EMPLOYED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.13375

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
 MISS M RICHARDSON 288

Mailing Address 29 HIGHBRIDGE XING APT 3301

City State Zip Code  
**ASHEVILLE NC 28803**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 0 / 2 0 1 1

Transaction ID: SA11AI.13458

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MISS M RICHARDSON 288

Mailing Address 29 HIGHBRIDGE XING APT 3301

City State Zip Code  
**ASHEVILLE NC 28803**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 650.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.13459

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
 MR JOEL B ROTHMAN 926

Mailing Address 27 CARMEL BAY DR

City State Zip Code  
**CORONA DEL MAR CA 92625**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 ENTERTAINMENT INDUSTRY

Occupation  
 MUSIC PRODUCER

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.13782

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
 DR WAYNE RYAN 681

Mailing Address 1606 S 187TH CIR

City State Zip Code  
**OMAHA NE 68130**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 STRECK LABORATORIES

Occupation  
 DOCTOR

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.13904

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code  
**PALM CITY FL 34990**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.13992

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)  
 MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code  
**PALM CITY FL 34990**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 325.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.13993

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code  
**PALM CITY FL 34990**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 525.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.13994

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

**375.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MR STEPHEN A SANDOR 481

Mailing Address 1717 KINGS HWY

City State Zip Code  
 LINCOLN PARK MI 48146

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 207.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 5 / 2 0 1 1

Transaction ID: SA11AI.13998

Amount of Each Receipt this Period

104.00

**B.**

Full Name (Last, First, Middle Initial)  
 MR STEPHEN A SANDOR 481

Mailing Address 1717 KINGS HWY

City State Zip Code  
 LINCOLN PARK MI 48146

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 337.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.13999

Amount of Each Receipt this Period

130.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR STEPHEN A SANDOR 481

Mailing Address 1717 KINGS HWY

City State Zip Code  
 LINCOLN PARK MI 48146

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 438.03

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11AI.14000

Amount of Each Receipt this Period

100.55

**SUBTOTAL** of Receipts This Page (optional) .....

**334.55**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)

MR STEPHEN A SANDOR 481

Mailing Address 1717 KINGS HWY

City

LINCOLN PARK

State

MI

Zip Code

48146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.93

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 1 1

Transaction ID: SA11AI.14001

Amount of Each Receipt this Period

61.90

**B.**

Full Name (Last, First, Middle Initial)

MR STEPHEN A SANDOR 481

Mailing Address 1717 KINGS HWY

City

LINCOLN PARK

State

MI

Zip Code

48146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.93

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.14002

Amount of Each Receipt this Period

140.00

**C.**

Full Name (Last, First, Middle Initial)

MR STEPHEN A SANDOR 481

Mailing Address 1717 KINGS HWY

City

LINCOLN PARK

State

MI

Zip Code

48146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.93

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.14003

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional) .....

326.90

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.**Full Name (Last, First, Middle Initial)  
MRS ALYCE SCHLECH 760

Mailing Address 611 NE ALSBURY BLVD APT 524

City	State	Zip Code
BURLESON	TX	76028

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	0	/	2	0	1	1

Transaction ID: SA11AI.14131

Amount of Each Receipt this Period

300.00

**B.**Full Name (Last, First, Middle Initial)  
MRS ALYCE SCHLECH 760

Mailing Address 611 NE ALSBURY BLVD APT 524

City	State	Zip Code
BURLESON	TX	76028

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	2	/	2	0	1	1

Transaction ID: SA11AI.14130

Amount of Each Receipt this Period

600.00

**C.**Full Name (Last, First, Middle Initial)  
MR MAX SCHMID 986

Mailing Address 1249 NE 5TH AVE

City	State	Zip Code
CAMAS	WA	98607

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	4	/	2	0	1	1

Transaction ID: SA11AI.14146

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS MARIE-LUISE SCHUBERT KALSI 770**

Mailing Address **13307 CAROUSEL CT**

City State Zip Code  
**HOUSTON TX 77041**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**06 / 13 / 2011**

**Transaction ID: SA11AI.14197**

Amount of Each Receipt this Period

**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR DEWAYNE SHIPLEY 662**

Mailing Address **10001 W 127TH TER**

City State Zip Code  
**OVERLAND PARK KS 66213**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**BUSINESS OWNER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**06 / 06 / 2011**

**Transaction ID: SA11AI.14433**

Amount of Each Receipt this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR BERT SHUGARS 490**

Mailing Address **209 W DELAWARE ST**

City State Zip Code  
**DECATUR MI 49045**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**05 / 09 / 2011**

**Transaction ID: SA11AI.14474**

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**300.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MR BERT SHUGARS 490

Mailing Address 209 W DELAWARE ST

City State Zip Code  
**DECATUR MI 49045**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.14475

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
 MR JOHN SIAS 941

Mailing Address 1100 SACRAMENTO ST APT 1002

City State Zip Code  
**SAN FRANCISCO CA 94108**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 CHRONICLE PUBLISHING INC

Occupation  
 PRESIDENT

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.14490

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR JOHN J SIEFFERT 480, JR

Mailing Address 740 RANDALL DR

City State Zip Code  
**TROY MI 48085**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 1 / 2 0 1 1

Transaction ID: SA11AI.14497

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN J SIEFFERT 480, JR

Mailing Address 740 RANDALL DR

City

TROY

State

MI

Zip Code

48085

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.14496

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MR ROBERT STICKEL 921

Mailing Address 2666 DOVE ST

City

SAN DIEGO

State

CA

Zip Code

92103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 2 / 2 0 1 1

Transaction ID: SA11AI.14994

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT STICKEL 921

Mailing Address 2666 DOVE ST

City

SAN DIEGO

State

CA

Zip Code

92103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.14995

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND 890

Mailing Address 953 PYRITE AVE  
953 PYRITE AVE

City State Zip Code  
 HENDERSON NV 89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 274.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.15150

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND 890

Mailing Address 953 PYRITE AVE  
953 PYRITE AVE

City State Zip Code  
 HENDERSON NV 89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 348.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.15149

Amount of Each Receipt this Period

74.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND 890

Mailing Address 953 PYRITE AVE  
953 PYRITE AVE

City State Zip Code  
 HENDERSON NV 89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 398.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 1 1

Transaction ID: SA11AI.15152

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

224.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 51 / 92

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MR ROBERT SUNDERLAND 890

Mailing Address **953 PYRITE AVE**  
**953 PYRITE AVE**

City State Zip Code  
**HENDERSON NV 89011**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**448.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 6 / 0 2 / 2 0 1 1**

Transaction ID: SA11AI.15153

Amount of Each Receipt this Period

**50.00**

**B.**

Full Name (Last, First, Middle Initial)  
 MR ROBERT SUNDERLAND 890

Mailing Address **953 PYRITE AVE**  
**953 PYRITE AVE**

City State Zip Code  
**HENDERSON NV 89011**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**473.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 6 / 1 0 / 2 0 1 1**

Transaction ID: SA11AI.15151

Amount of Each Receipt this Period

**25.00**

**C.**

Full Name (Last, First, Middle Initial)  
 MR ROBERT SUNDERLAND 890

Mailing Address **953 PYRITE AVE**  
**953 PYRITE AVE**

City State Zip Code  
**HENDERSON NV 89011**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**573.00**

Date of Receipt

M M / D D / Y Y Y Y  
**0 6 / 2 7 / 2 0 1 1**

Transaction ID: SA11AI.15154

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**175.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 92

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.**Full Name (Last, First, Middle Initial)  
MR ROBERT W TREADWELL 780

Mailing Address 135 PLAZA DR APT 104

City	State	Zip Code
KERRVILLE	TX	78028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	0	/	2	0	1	1

Transaction ID: SA11AI.15533

Amount of Each Receipt this Period

200.00

**B.**Full Name (Last, First, Middle Initial)  
MR ROBERT W TREADWELL 780

Mailing Address 135 PLAZA DR APT 104

City	State	Zip Code
KERRVILLE	TX	78028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	2	/	2	0	1	1

Transaction ID: SA11AI.15534

Amount of Each Receipt this Period

300.00

**C.**Full Name (Last, First, Middle Initial)  
MR JOHN VALERIUS 750

Mailing Address 1909 CANTERBURY ST

City	State	Zip Code
IRVING	TX	75062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	1

Transaction ID: SA11AI.15652

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

A.

Full Name (Last, First, Middle Initial)  
 MR JOHN VALERIUS 750

Mailing Address 1909 CANTERBURY ST

City State Zip Code  
 IRVING TX 75062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 430.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.15653

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)  
 MR JOHN VALERIUS 750

Mailing Address 1909 CANTERBURY ST

City State Zip Code  
 IRVING TX 75062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 630.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.15654

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)  
 MR JOHN VALERIUS 750

Mailing Address 1909 CANTERBURY ST

City State Zip Code  
 IRVING TX 75062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 680.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.15655

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 MR JOHN VALERIUS 750

Mailing Address 1909 CANTERBURY ST

City State Zip Code  
 IRVING TX 75062

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.15656

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
 LYNN VIA 240

Mailing Address 3358 PEAKWOOD DR SW

City State Zip Code  
 ROANOKE VA 24014

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 HOMEMAKER

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 2 5 / 2 0 1 1

Transaction ID: SA11AI.15729

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR GEORGE C VISMAN 956

Mailing Address 2901 HIGH HILL RD

City State Zip Code  
 PLACERVILLE CA 95667

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 SELF EMPLOYED

Occupation  
 ORCHARDIST

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.15745

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

1235.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**ROBERT WEINER 303**

Mailing Address **2 LEIGHTON CT NW**

City State Zip Code  
**ATLANTA GA 30327**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CONSTANTINE CPT/MILLIKEN**

Occupation  
**FOUNDER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**375.00**

Date of Receipt

**01 / 18 / 2011**

**Transaction ID: SA11AI.16039**

Amount of Each Receipt this Period

**375.00**

**B.**

Full Name (Last, First, Middle Initial)  
**ROBERT WEINER 303**

Mailing Address **2 LEIGHTON CT NW**

City State Zip Code  
**ATLANTA GA 30327**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**CONSTANTINE CPT/MILLIKEN**

Occupation  
**FOUNDER**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**750.00**

Date of Receipt

**02 / 25 / 2011**

**Transaction ID: SA11AI.16040**

Amount of Each Receipt this Period

**375.00**

**C.**

Full Name (Last, First, Middle Initial)  
**IRVING WEISS 333**

Mailing Address **7647 SOUTHAMPTON TER**

City State Zip Code  
**TAMARAC FL 33321**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**221.00**

Date of Receipt

**03 / 18 / 2011**

**Transaction ID: SA11AI.16052**

Amount of Each Receipt this Period

**53.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**803.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
 IRVING WEISS 333

Mailing Address 7647 SOUTHAMPTON TER

City State Zip Code  
**TAMARAC FL 33321**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 251.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.16053

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)  
 DR WALTER F WILD 967

Mailing Address 41-473 KALANIANA'OLE HWY

City State Zip Code  
**WAIMANALO HI 96795**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.16275

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR BOBBY WILLIAMS 612

Mailing Address 3623 9TH ST

City State Zip Code  
**EAST MOLINE IL 61244**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.16325

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

**230.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 92

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**MR BOBBY WILLIAMS 612**

Mailing Address **3623 9TH ST**

City State Zip Code  
**EAST MOLINE IL 61244**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt

**06 / 13 / 2011**

**Transaction ID: SA11AI.16324**

Amount of Each Receipt this Period

**50.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS BARBARA H WILSON 941**

Mailing Address **2540 GREEN ST**

City State Zip Code  
**SAN FRANCISCO CA 94123**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt

**01 / 18 / 2011**

**Transaction ID: SA11AI.16378**

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**BRYAN WRIGHT 208**

Mailing Address **21129 GOLF ESTATES DR**

City State Zip Code  
**GAITHERSBURG MD 20882**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**BLACKWOOD ONE INC**

Occupation  
**EXECUTIVE**

Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt

**06 / 27 / 2011**

**Transaction ID: SA11AI.16507**

Amount of Each Receipt this Period

**500.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**800.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 92

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.**Full Name (Last, First, Middle Initial)  
MR GEORGE W YOUNG 012

Mailing Address 235 WALKER ST APT 252

City	State	Zip Code
LENOX	MA	01240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	1

Transaction ID: SA11AI.16561

Amount of Each Receipt this Period

250.00

**B.**Full Name (Last, First, Middle Initial)  
MR RAY L ZOBEL 857

Mailing Address 36727 S OCOTILLO CANYON DR

City	State	Zip Code
TUCSON	AZ	85739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	1	1

Transaction ID: SA11AI.16656

Amount of Each Receipt this Period

100.00

**C.**Full Name (Last, First, Middle Initial)  
MR RAY L ZOBEL 857

Mailing Address 36727 S OCOTILLO CANYON DR

City	State	Zip Code
TUCSON	AZ	85739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED
 Receipt For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	1	1

Transaction ID: SA11AI.16657

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

450.00

TOTAL This Period (last page this line number only) .....

35733.66

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.**Full Name (Last, First, Middle Initial)  
ADKINS EXPOSURES

Mailing Address 1308 RHODE ISLAND AVE NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
WEBSITE / BLOGCandidate Name  
BLACK REPUBLICAN PACOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4127

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	1	1

Amount of Each Disbursement this Period

400.00

**B.**Full Name (Last, First, Middle Initial)  
BASE CONNECT INCMailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - CREATIVECandidate Name  
BLACK REPUBLICAN PACOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4129

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	1	1

Amount of Each Disbursement this Period

1362.42

**C.**Full Name (Last, First, Middle Initial)  
BASE CONNECT INCMailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - CREATIVECandidate Name  
BLACK REPUBLICAN PACOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4130

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	1	1

Amount of Each Disbursement this Period

14252.56

SUBTOTAL of Disbursements This Page (optional) ▶

16014.98

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BASE CONNECT INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4131</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 7251.50</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) BASE CONNECT INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4132</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 4248.55</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) BASE CONNECT INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4133</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1711.69</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

13211.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BASE CONNECT INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4134  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 8 / 2 0 1 1</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>5189.18</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) BASE CONNECT INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4135  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 1 1</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>953.74</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) BASE CONNECT INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4136  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 1 1</div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>6657.47</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**12800.39**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) BASE CONNECT INC</p> <hr/> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <hr/> <p>City WASHINGTON State DC Zip Code 20005</p> <hr/> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <hr/> <p>Candidate Name BLACK REPUBLICAN PAC</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4137  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 6 / 2 0 1 1</div> </p> <hr/> <p><b>Amount of Each Disbursement this Period</b>  <div>1073.16</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) BASE CONNECT INC</p> <hr/> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <hr/> <p>City WASHINGTON State DC Zip Code 20005</p> <hr/> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <hr/> <p>Candidate Name BLACK REPUBLICAN PAC</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4138  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 1 1</div> </p> <hr/> <p><b>Amount of Each Disbursement this Period</b>  <div>6494.10</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES INC</p> <hr/> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <hr/> <p>City WASHINGTON State DC Zip Code 20005</p> <hr/> <p>Purpose of Disbursement DIRECT MAIL - POSTAGE</p> <hr/> <p>Candidate Name BLACK REPUBLICAN PAC</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4139  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 6 / 2 0 1 1</div> </p> <hr/> <p><b>Amount of Each Disbursement this Period</b>  <div>12039.25</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

19606.51

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - POSTAGE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4140</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 5959.08</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - POSTAGE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4141</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 5211.21</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - POSTAGE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4142</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 17983.85</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

29154.14

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.**Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES INCMailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGECandidate Name  
BLACK REPUBLICAN PACOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4143

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	1

Amount of Each Disbursement this Period

9923.57

**B.**Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES INCMailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGECandidate Name  
BLACK REPUBLICAN PACOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4144

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

4760.93

**C.**Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES INCMailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGECandidate Name  
BLACK REPUBLICAN PACOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4145

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	1

Amount of Each Disbursement this Period

4473.74

SUBTOTAL of Disbursements This Page (optional) .....

19158.24

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4146

Date of Disbursement

05 / 19 / 2011

Amount of Each Disbursement this Period

5195.12

B.

Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4147

Date of Disbursement

05 / 26 / 2011

Amount of Each Disbursement this Period

5037.89

C.

Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4148

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

12973.48

SUBTOTAL of Disbursements This Page (optional) .....

23206.49

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.**Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES INCMailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGECandidate Name  
BLACK REPUBLICAN PACOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4149

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	6	/	2	0	1	1

Amount of Each Disbursement this Period

1101.93

**B.**Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICES INCMailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL - POSTAGECandidate Name  
BLACK REPUBLICAN PACOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4150

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	1	1

Amount of Each Disbursement this Period

3510.24

**C.**Full Name (Last, First, Middle Initial)  
CENTURY DATA SYSTEMS CORPMailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DATA PROCESSINGCandidate Name  
BLACK REPUBLICAN PACOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4151

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	1	1

Amount of Each Disbursement this Period

3241.27

SUBTOTAL of Disbursements This Page (optional) .....

7853.44

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
CENTURY DATA SYSTEMS CORP

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DATA PROCESSING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4152

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1322.90

B.

Full Name (Last, First, Middle Initial)  
CENTURY DATA SYSTEMS CORP

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DATA PROCESSING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4153

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1366.14

C.

Full Name (Last, First, Middle Initial)  
CENTURY DATA SYSTEMS CORP

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DATA PROCESSING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4154

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1356.55

SUBTOTAL of Disbursements This Page (optional) .....

4045.59

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**CENTURY DATA SYSTEMS CORP**

Mailing Address **1155 - 15TH STREET NW  
 SUITE 410**

City **WASHINGTON** State **DC** Zip Code **20005**

Purpose of Disbursement  
**DATA PROCESSING**

Candidate Name  
**BLACK REPUBLICAN PAC**

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.4155**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**3406.37**

**B.**

Full Name (Last, First, Middle Initial)  
**CENTURY DATA SYSTEMS CORP**

Mailing Address **1155 - 15TH STREET NW  
 SUITE 410**

City **WASHINGTON** State **DC** Zip Code **20005**

Purpose of Disbursement  
**DATA PROCESSING**

Candidate Name  
**BLACK REPUBLICAN PAC**

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.4156**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**5706.36**

**C.**

Full Name (Last, First, Middle Initial)  
**CONSOLIDATED MAILING SERVICE**

Mailing Address **504 SHAW ROAD  
 SUITE 206**

City **STERLING** State **VA** Zip Code **20166**

Purpose of Disbursement  
**DIRECT MAIL - PRINTING / MAILSHOP**

Candidate Name  
**BLACK REPUBLICAN PAC**

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.4158**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**4000.00**

**SUBTOTAL** of Disbursements This Page (optional) .....

**13112.73**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE</p> <p>Mailing Address 504 SHAW ROAD SUITE 206</p> <p>City STERLING State VA Zip Code 20166</p> <p>Purpose of Disbursement DIRECT MAIL - PRINTING / MAILSHOP</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4159</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 6627.46</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE</p> <p>Mailing Address 504 SHAW ROAD SUITE 206</p> <p>City STERLING State VA Zip Code 20166</p> <p>Purpose of Disbursement DIRECT MAIL - PRINTING / MAILSHOP</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4160</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1784.61</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE</p> <p>Mailing Address 504 SHAW ROAD SUITE 206</p> <p>City STERLING State VA Zip Code 20166</p> <p>Purpose of Disbursement DIRECT MAIL - PRINTING / MAILSHOP</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4161</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 2920.25</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

11332.32

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICE

Mailing Address 504 SHAW ROAD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING / MAILSHOP

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4162

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1433.93

**B.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICE

Mailing Address 504 SHAW ROAD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING / MAILSHOP

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4163

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6277.00

**C.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICE

Mailing Address 504 SHAW ROAD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING / MAILSHOP

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4164

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3428.50

**SUBTOTAL** of Disbursements This Page (optional) .....

11139.43

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 71 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
CONSULTING - MANAGEMENT

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4165

Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)  
EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
CONSULTING - MANAGEMENT

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4166

Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)  
EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
CONSULTING - MANAGEMENT

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4167

Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

<b>A.</b> Full Name (Last, First, Middle Initial) EDWARD J COUSAR <hr/> Mailing Address PO BOX 96613	<b>Transaction ID:</b> SB21B.4168 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	1	1	
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	0		2	0	1	1													
City WASHINGTON State DC Zip Code 20090 Purpose of Disbursement CONSULTING - MANAGEMENT Candidate Name BLACK REPUBLICAN PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																				
1500.00																						
<b>B.</b> Full Name (Last, First, Middle Initial) EDWARD J COUSAR <hr/> Mailing Address PO BOX 96613 <hr/> City WASHINGTON State DC Zip Code 20090 Purpose of Disbursement CONSULTING - MANAGEMENT Candidate Name BLACK REPUBLICAN PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4169 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	1	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	1		2	0	1	1													
2500.00																						
<b>C.</b> Full Name (Last, First, Middle Initial) EDWARD J COUSAR <hr/> Mailing Address PO BOX 96613 <hr/> City WASHINGTON State DC Zip Code 20090 Purpose of Disbursement CONSULTING - MANAGEMENT Candidate Name BLACK REPUBLICAN PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4170 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	4		2	0	1	1	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		1	4		2	0	1	1													
2500.00																						

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 73 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
CONSULTING - MANAGEMENT

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4171

Date of Disbursement

05 / 26 / 2011

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)  
ELECTRONIC REPORTING SYSTEMS INC

Mailing Address 683 BERRYVILLE AVE

City WINCHESTER State VA Zip Code 22601

Purpose of Disbursement  
ELECTRONIC DISCLOSURE REPORTING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4172

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

2019.80

C.

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4173

Date of Disbursement

01 / 04 / 2011

Amount of Each Disbursement this Period

266.09

SUBTOTAL of Disbursements This Page (optional) .....

4785.89

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**FIRST VIRGINIA COMMUNITY BANK**

Mailing Address **11325 RANDOM HILLS DRIVE**

City **FAIRFAX** State **VA** Zip Code **22030**

Purpose of Disbursement  
**AMEX COLLECTION FEE**

Candidate Name  
**BLACK REPUBLICAN PAC**

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.4182**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**4.95**

**B.**

Full Name (Last, First, Middle Initial)  
**FIRST VIRGINIA COMMUNITY BANK**

Mailing Address **11325 RANDOM HILLS DRIVE**

City **FAIRFAX** State **VA** Zip Code **22030**

Purpose of Disbursement  
**AMEX DISCOUNT FEE**

Candidate Name  
**BLACK REPUBLICAN PAC**

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.4188**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**31.68**

**C.**

Full Name (Last, First, Middle Initial)  
**FIRST VIRGINIA COMMUNITY BANK**

Mailing Address **11325 RANDOM HILLS DRIVE**

City **FAIRFAX** State **VA** Zip Code **22030**

Purpose of Disbursement  
**SERVICE CHARGE**

Candidate Name  
**BLACK REPUBLICAN PAC**

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.4194**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**67.25**

**SUBTOTAL** of Disbursements This Page (optional) .....

**103.88**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)

FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4174

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.00

B.

Full Name (Last, First, Middle Initial)

FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4175

Date of Disbursement

/   /

Amount of Each Disbursement this Period

151.57

C.

Full Name (Last, First, Middle Initial)

FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
AMEX COLLECTION FEE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4183

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.95

SUBTOTAL of Disbursements This Page (optional) .....

231.52

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 76 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4189

Date of Disbursement

/   /

Amount of Each Disbursement this Period

21.19

**B.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4195

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.75

**C.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4176

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.00

**SUBTOTAL** of Disbursements This Page (optional) .....

148.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4177

Date of Disbursement

03 / 02 / 2011

Amount of Each Disbursement this Period

119.06

**B.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
AMEX COLLECTION FEE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4184

Date of Disbursement

03 / 22 / 2011

Amount of Each Disbursement this Period

4.95

**C.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.4190

Date of Disbursement

03 / 31 / 2011

Amount of Each Disbursement this Period

28.00

**SUBTOTAL** of Disbursements This Page (optional) .....

152.01

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4196

Date of Disbursement

/   /

Amount of Each Disbursement this Period

179.31

**B.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4178

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.00

**C.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4179

Date of Disbursement

/   /

Amount of Each Disbursement this Period

167.17

**SUBTOTAL** of Disbursements This Page (optional) .....

421.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
AMEX COLLECTION FEE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4185

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.95

**B.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4191

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.48

**C.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4197

Date of Disbursement

/   /

Amount of Each Disbursement this Period

146.88

**SUBTOTAL** of Disbursements This Page (optional) .....

212.31

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4180

Date of Disbursement

05 / 03 / 2011

Amount of Each Disbursement this Period

285.37

B.

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
AMEX COLLECTION FEE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4186

Date of Disbursement

05 / 23 / 2011

Amount of Each Disbursement this Period

4.95

C.

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4192

Date of Disbursement

05 / 31 / 2011

Amount of Each Disbursement this Period

20.48

SUBTOTAL of Disbursements This Page (optional) .....

310.80

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
**FIRST VIRGINIA COMMUNITY BANK**

Mailing Address **11325 RANDOM HILLS DRIVE**

City **FAIRFAX** State **VA** Zip Code **22030**

Purpose of Disbursement  
**SERVICE CHARGE**

Candidate Name  
**BLACK REPUBLICAN PAC**

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.4198**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**98.33**

**B.**

Full Name (Last, First, Middle Initial)  
**FIRST VIRGINIA COMMUNITY BANK**

Mailing Address **11325 RANDOM HILLS DRIVE**

City **FAIRFAX** State **VA** Zip Code **22030**

Purpose of Disbursement  
**MERCHANT SERVICE CHARGE**

Candidate Name  
**BLACK REPUBLICAN PAC**

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.4181**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**212.59**

**C.**

Full Name (Last, First, Middle Initial)  
**FIRST VIRGINIA COMMUNITY BANK**

Mailing Address **11325 RANDOM HILLS DRIVE**

City **FAIRFAX** State **VA** Zip Code **22030**

Purpose of Disbursement  
**AMEX COLLECTION FEE**

Candidate Name  
**BLACK REPUBLICAN PAC**

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: SB21B.4187**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**4.95**

**SUBTOTAL** of Disbursements This Page (optional) .....

**315.87**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4193

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

34.82

**B.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE

City State Zip Code  
FAIRFAX VA 22030

Purpose of Disbursement  
SERVICE CHARGE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4199

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

152.00

**C.** Full Name (Last, First, Middle Initial)  
INTEGRAM

Mailing Address 8421 HILLTOP RD

City State Zip Code  
FAIRFAX VA 22031

Purpose of Disbursement  
DIRECT MAIL - PRINTING / MAILSHOP

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4201

Date of Disbursement

01 / 13 / 2011

Amount of Each Disbursement this Period

3480.92

**SUBTOTAL** of Disbursements This Page (optional) .....

3667.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)  
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
DIRECT MAIL - PRINTING / MAILSHOP

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4202

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3044.98

**B.**

Full Name (Last, First, Middle Initial)  
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
DIRECT MAIL - PRINTING / MAILSHOP

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4203

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3102.50

**C.**

Full Name (Last, First, Middle Initial)  
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
DIRECT MAIL - PRINTING / MAILSHOP

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4204

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2547.80

**SUBTOTAL** of Disbursements This Page (optional) .....

8695.28

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)  
LEGACY LIST MARKETING INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
LIST RENTAL EXPENSE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4205

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2264.00

**B.**

Full Name (Last, First, Middle Initial)  
LEGACY LIST MARKETING INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
LIST RENTAL EXPENSE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4206

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
LEGACY LIST MARKETING INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
LIST RENTAL EXPENSE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4207

Date of Disbursement

/   /

Amount of Each Disbursement this Period

816.43

**SUBTOTAL** of Disbursements This Page (optional) .....

3280.43

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)  
LEGACY LIST MARKETING INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
LIST RENTAL EXPENSE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4208

Date of Disbursement

04 / 28 / 2011

Amount of Each Disbursement this Period

442.55

B.

Full Name (Last, First, Middle Initial)  
LEGACY LIST MARKETING INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
LIST RENTAL EXPENSE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4209

Date of Disbursement

06 / 02 / 2011

Amount of Each Disbursement this Period

2028.42

C.

Full Name (Last, First, Middle Initial)  
LEGACY LIST MARKETING INC

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
LIST RENTAL EXPENSE

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4210

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

1920.00

SUBTOTAL of Disbursements This Page (optional) .....

4390.97

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 86 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)  
US POSTMASTER

Mailing Address MAIN POST OFFICE

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
PO BOX RENEWAL

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4211

Date of Disbursement

/   /

Amount of Each Disbursement this Period

520.00

**B.**

Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4213

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2016.95

**C.**

Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4215

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1435.26

**SUBTOTAL** of Disbursements This Page (optional) .....

3972.21

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 92

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4216

Date of Disbursement

/   /

Amount of Each Disbursement this Period

980.45

**B.** Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4217

Date of Disbursement

/   /

Amount of Each Disbursement this Period

867.46

**C.** Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4218

Date of Disbursement

/   /

Amount of Each Disbursement this Period

635.28

**SUBTOTAL** of Disbursements This Page (optional) .....

2483.19

**TOTAL** This Period (last page this line number only) .....

225308.52

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 88 / 92

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JEFF FREDERICK (VA SENATE)

Mailing Address PO BOX 58

City WOODBRIDGE State VA Zip Code 22194

Purpose of Disbursement  
POLITICAL CONTRIBUTION - STATE

Candidate Name  
JEFF FREDERICK

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4227

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
STIRRUP FOR SENATE (VA SENATE)

Mailing Address PO BOX 280

City HAYMARKET State VA Zip Code 20168

Purpose of Disbursement  
POLITICAL CONTRIBUTION - STATE

Candidate Name  
JOHN STIRRUP

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.4229

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

5000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 89 / 92

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
BASE CONNECT INCNature of Debt (Purpose):  
DIRECT MAIL - CREATIVEMailing Address 1155 - 15TH STREET NW  
SUITE 410City State ZIP Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

60277.04

Transaction ID: SD10.4112

Amount Incurred This Period

0.00

Payment This Period

49194.37

Outstanding Balance at Close of This Period

11082.67

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
CENTURY DATA SYSTEMS CORPNature of Debt (Purpose):  
DATA PROCESSINGMailing Address 1155 - 15TH STREET NW  
SUITE 410City State ZIP Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

9489.59

Transaction ID: SD10.4113

Amount Incurred This Period

6910.00

Payment This Period

16399.59

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
COLORTREENature of Debt (Purpose):  
DIRECT MAIL - PRINTING /  
MAILSHOP

Mailing Address 2519 BRITTONS HILL RD

City State ZIP Code  
RICHMOND VA 23230

Outstanding Balance Beginning This Period

2559.38

Transaction ID: SD10.4114

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2559.38

1) **SUBTOTALS** This Period This Page (optional).....

13642.05

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 90 / 92

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
CONSOLIDATED MAILING SERVICENature of Debt (Purpose):  
DIRECT MAIL - PRINTING /  
MAILSHOPMailing Address 504 SHAW ROAD  
SUITE 206City State ZIP Code  
STERLING VA 20166

Outstanding Balance Beginning This Period

19932.25

Transaction ID: SD10.4116

Amount Incurred This Period

22093.74

Payment This Period

26471.75

Outstanding Balance at Close of This Period

15554.24

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ELECTRONIC REPORTING SYSTEMS INCNature of Debt (Purpose):  
ELECTRONIC DISCLOSURE REP-  
ORTING

Mailing Address 683 BERRYVILLE AVE

City State ZIP Code  
WINCHESTER VA 22601

Outstanding Balance Beginning This Period

2688.80

Transaction ID: SD10.4117

Amount Incurred This Period

0.00

Payment This Period

2019.80

Outstanding Balance at Close of This Period

669.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
INTEGRAMNature of Debt (Purpose):  
DIRECT MAIL - PRINTING /  
MAILSHOP

Mailing Address 8421 HILLTOP RD

City State ZIP Code  
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

9628.40

Transaction ID: SD10.4118

Amount Incurred This Period

2547.80

Payment This Period

12176.20

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

16223.24

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 91 / 92

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LEGACY LIST MARKETING INCNature of Debt (Purpose):  
LIST RENTAL EXPENSEMailing Address 1155 - 15TH STREET NW  
SUITE 410City State ZIP Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

3336.48

Transaction ID: SD10.4119

Amount Incurred This Period

13490.09

Payment This Period

7671.40

Outstanding Balance at Close of This Period

9155.17

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MACKENZIE & COMPANYNature of Debt (Purpose):  
CONSULTING - COMPLIANCE

Mailing Address 2776 S ARLINGTON MILL DR #806

City State ZIP Code  
ARLINGTON VA 22206

Outstanding Balance Beginning This Period

1500.00

Transaction ID: SD10.4120

Amount Incurred This Period

4000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5500.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
PATTON-KIEHLNature of Debt (Purpose):  
DIRECT MAIL - PRINTING /  
MAILSHOP

Mailing Address PO BOX 590

City State ZIP Code  
THORNBURG VA 22565

Outstanding Balance Beginning This Period

189.95

Transaction ID: SD10.4122

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

189.95

1) **SUBTOTALS** This Period This Page (optional).....

14845.12

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 92 / 92

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WASHINGTON INTELLIGENCE BUREAUNature of Debt (Purpose):  
CAGING & ESCROW SERVICES

Mailing Address 4128 PEPSI PLACE

City State ZIP Code  
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

2016.95

Transaction ID: SD10.4124

Amount Incurred This Period

7305.64

Payment This Period

5935.40

Outstanding Balance at Close of This Period

3387.19

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WEST END PRINTINGNature of Debt (Purpose):  
DIRECT MAIL - PRINTING /  
MAILSHOP

Mailing Address 1609 SHERWOOD AVE

City State ZIP Code  
RICHMOND VA 23220

Outstanding Balance Beginning This Period

200.00

Transaction ID: SD10.4125

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) **SUBTOTALS** This Period This Page (optional).....

3587.19

2) **TOTALS** This Period (last page this line number only).....

48297.60

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

48297.60